

For the year Jan. 1–Dec. 31, 2023, or other tax year beginning , 2023, ending , 20

See separate instructions.

Your first name and middle initial JIMMY AHMET	Last name YOUSSEFI	Your social security number 220-75-3718
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. 14600 DUFIEF MILL RD		Apt. no.	Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse	
City, town or post office. If you have a foreign address, also complete spaces below. NORTH POTOMAC		State MD		ZIP code 20878-2559
Foreign country name	Foreign province/state/county	Foreign postal code		

Filing Status ☒ Single ☐ Head of household (HOH)
☐ Married filing jointly (even if only one had income) ☐ Qualifying surviving spouse (QSS)
☐ Married filing separately (MFS)
If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent:

Digital Assets At any time during 2023, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? (See instructions.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☒ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1959 ☐ Are blind Spouse: ☐ Was born before January 2, 1959 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents
If more than four dependents, see instr. and check here <input type="checkbox"/>					

Income Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld. If you did not get a Form W-2, see instructions.	1a	Total amount from Form(s) W-2, box 1 (see instructions)	1a	4,900				
	b	Household employee wages not reported on Form(s) W-2	1b					
	c	Tip income not reported on line 1a (see instructions)	1c					
	d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)	1d					
	e	Taxable dependent care benefits from Form 2441, line 26	1e					
	f	Employer-provided adoption benefits from Form 8839, line 29	1f					
	g	Wages from Form 8919, line 6	1g					
	h	Other earned income (see instructions)	1h					
	i	Nontaxable combat pay election (see instructions)	1i					
	z	Add lines 1a through 1h	1z	4,900				
Attach Sch. B if required.	2a	Tax-exempt interest	2a		b	Taxable interest	2b	21
	3a	Qualified dividends	3a		b	Ordinary dividends	3b	
	4a	IRA distributions	4a		b	Taxable amount	4b	
	5a	Pensions and annuities	5a		b	Taxable amount	5b	
Standard Deduction for • Single or Married filing separately, \$13,850 • Married filing jointly or Qualifying surviving spouse, \$27,700 • Head of household, \$20,800 • If you checked any box under Standard Deduction, see instructions.	6a	Soc. sec. ben.	6a		b	Taxable amount	6b	
	c	If you elect to use the lump-sum election method, check here (see instructions)			7		7	
	7	Capital gain or (loss). Attach Schedule D if required. If not required, check here			8		8	0
	8	Other income from Schedule 1, line 10			9		9	4,921
	9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income			10		10	0
	10	Adjustments to income from Schedule 1, line 26			11		11	4,921
	11	Subtract line 10 from line 9. This is your adjusted gross income			12		12	5,300
	12	Standard deduction or itemized deductions (from Schedule A)			13		13	
	13	Qualified business income deduction from Form 8995 or Form 8995-A			14		14	5,300
	14	Add lines 12 and 13			15		15	0
	15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your taxable income						

Tax and Credits

16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972	16	0
3	<input type="checkbox"/>	17	
17	Amount from Schedule 2, line 3	18	0
18	Add lines 16 and 17	19	
19	Child tax credit or credit for other dependents from Schedule 8812	20	
20	Amount from Schedule 3, line 8	21	
21	Add lines 19 and 20	22	0
22	Subtract line 21 from line 18. If zero or less, enter -0-	23	
23	Other taxes, including self-employment tax, from Schedule 2, line 21	24	0
24	Add lines 22 and 23. This is your total tax		

Payments

25	Federal income tax withheld from:	25a	172	25d	172
a	Form(s) W-2	25b			
b	Form(s) 1099	25c			
c	Other forms (see instructions)				
d	Add lines 25a through 25c				
26	2023 estimated tax payments and amount applied from 2022 return	26			
27	Earned income credit (EIC) NO	27			
28	Additional child tax credit from Schedule 8812	28			
29	American opportunity credit from Form 8863, line 8	29			
30	Reserved for future use	30			
31	Amount from Schedule 3, line 15	31			
32	Add lines 27, 28, 29 and 31. These are your total other payments and refundable credits	32			
33	Add lines 25d, 26, and 32. These are your total payments	33	172		

If you have a qualifying child, attach Sch. EIC.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	172
35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	172
b	Routing number XXXXXXXXXX c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number XXXXXXXXXXXXXXXXXXXX		
36	Amount of line 34 you want applied to your 2024 estimated tax	36	

Direct deposit?
See instructions.**Amount You Owe**

37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions	37	
38	Estimated tax penalty (see instructions)	38	

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☒ **Yes. Complete below.** ☐ **No**

Designee's name	YOAV KATZ	Phone no.	301-951-8700	Personal identification number (PIN)	46413
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Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see instr.)
STUDENT			
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see instr.)

Joint return?
See instructions.
Keep a copy for your records.

Phone no.	Email address	Preparer's name	Preparer's signature	Date	PTIN	Check if:
		YOAV KATZ	YOAV KATZ	06/13/24	P01057947	<input type="checkbox"/> Self-employed
Paid	Firm's name	Phone no.				
	KATZ & CO., P.A.	301-951-8700				
Preparer Use Only	Firm's address	Firm's EIN				
	BETHESDA MD 20814	52-1260827				

Go to www.irs.gov/Form1040 for instructions and the latest information.Form **1040** (2023)

Form 1040

Salaries & Wages Report

2023

Name

JIMMY AHMET YOUSSEFI

Taxpayer Identification Number

220-75-3718

T/S	Employer	Federal Wages	Federal Withheld	Soc Sec Wages
A	CANYON GRILL ENTERPRISES LLC	4,900	172	2,269
B				
C				
D				
E				
F				
G				
H				
I				
J				
K				
L				
M				
Taxpayer				
Spouse				
Totals		4,900	172	2,269

	Soc Sec Withheld	Medicare Wages	Medicare Withheld	Soc Sec Tips	Allocated Tips	Dep Care Ben	Other, Box 14
A	304	4,900	71	2,631			
B							
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
Taxpayer							
Spouse							
Totals	304	4,900	71	2,631			

	State	State Wages	State Withheld	Name of Locality	Local Wages	Local Withheld
A	MD	4,900	322			
B						
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						
M						
Taxpayer						
Spouse						
Totals		4,900	322			